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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 020801-000920US
	In re Application of Ian MacLachlan, et al.	
	Application Number 09/243,102 Filed February 2, 1999	
	For SYSTEMIC DELIVERY OF SERUM STABLE PLASMID LIPID PARTICLES FOR CANCER THERAPY	
	Group Art Unit 1635	Examiner J. Zara

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$930
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 465 .

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.

I am the  applicant/inventor

assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
attorney or agent of record.  
 attorney or agent under 37 CFR 1.34(a).

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide all the information and authorization on PTO-2028.**

April 2 2003

Date

  
Signature

Carol A. Fang, Reg. No. 48,631

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: ThD FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

01 FC-2253

465.00 CH